

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|------------|-----------------|
| FEE DETERMINATION | <i>HL</i> | | <i>6-22-01</i> |
| O.I.P.E. CLASSIFIER | | <i>43</i> | <i>7/5/01</i> |
| FORMALITY REVIEW | <i>SS</i> | <i>573</i> | <i>08-14-01</i> |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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| Final Original | |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE COPY

856-50585
12/11/01